

2010 ELECTION CYCLE

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
 2010 Judicial Election

Delbert Hosemann
 SECRETARY OF STATE

RECEIVE

SEP 20 2010

Campaign Finance
 Secretary of State

DATE STAMP

Name of Committee Committee To Elect Gerald W. Chatham, Sr.Address 291 Loshier Street, Hernando, MS 38632Telephone 662-429-0267 Fax _____Treasurer Sam Lauderdale Email _____
☐ Check here if above is different from previous report
TYPE OF REPORT

____ May 10, 2010 Periodic Report (January 1, 2010, through April 30, 2010).....Mandatory
 ____ June 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010).....Mandatory
X July 9, 2010 Periodic Report (June 1, 2010, through June 30, 2010).....Mandatory
 ____ October 10, 2009 Periodic Report (July 1, 2010, through September 30, 2010).....Mandatory
 ____ October 26, 2010 Pre-Election Report (October 1, 2010, through October 23, 2010).....Mandatory
 ____ November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).....Runoff Candidates
 ____ January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010).....Mandatory
 ____ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (II) and (III).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-Itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$ 2750.00 +\$ 1100	\$ 3850.00	\$ 3850.00
Total amount of disbursements	\$ 828.70 +\$ 0	\$ 828.70	\$ 828.70
Total amount of cash on hand		\$ 3021.30	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Sam Lauderdale
 Signature of Director or Treasurer

7-21-10
 Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 138, Jackson, MS 39205 or fax to 601-363-1498 or 601-578-2819.
 2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Page 1 of 1Name of Candidate or Committee Gerald W. Chatham, Sr.Reporting period June 1, 2010 through June 30, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Mississippi Physicians P.A.C.</u>		<u>6 / 14 / 10</u>	\$2500.00
Mailing Address <u>404 West Parkway Place</u>		<u> / / </u>	\$
City, State, Zip Code <u>Ridgeland, MS 39157</u>		<u> / / </u>	\$
Name of Employer (Required) _____		<u> / / </u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$ 2500.00
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Martin Zummach</u>		<u>6 / 14 / 10</u>	\$ 250.00
Mailing Address <u>P.O. Box 266</u>		<u> / / </u>	\$
City, State, Zip Code <u>Southaven, MS 38671</u>		<u> / / </u>	\$
Name of Employer (Required) <u>Sparkman Zummach & Perry, PC</u>		<u> / / </u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$250.00
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____		<u> / / </u>	\$
Mailing Address _____		<u> / / </u>	\$
City, State, Zip Code _____		<u> / / </u>	\$
Name of Employer (Required) _____		<u> / / </u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____		<u> / / </u>	\$
Mailing Address _____		<u> / / </u>	\$
City, State, Zip Code _____		<u> / / </u>	\$
Name of Employer (Required) _____		<u> / / </u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$

Name of Candidate or Committee Gerald W. Chatham, Sr.
 Reporting period June 1, 2010 through June 30, 2010

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Democrat Newspaper		
Mailing Address	<u>6 / 22 / 10</u>	\$ 169.95
219 East Main Street		
City, State, Zip Code	<u>6 / 28 / 10</u>	\$ 150.00
Senatobia, MS 38668		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 319.95
Political advertisement		
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Desoto Times Newspaper		
Mailing Address	<u>6 / 23 / 10</u>	\$ 258.75
2445 Hwy. 51		
City, State, Zip Code	<u> / / </u>	\$
Hernando, MS 38632		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 258.75
Political Advertisement		
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Panolian Newspaper		
Mailing Address	<u>6 / 28 / 10</u>	\$ 250.00
363 Hwy. 51		
City, State, Zip Code	<u> / / </u>	\$
Batesville, MS 38606		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 250.00
Political Advertisement		
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u> / / </u>	\$
City, State, Zip Code	<u> / / </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u> / / </u>	\$
City, State, Zip Code	<u> / / </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u> / / </u>	\$
City, State, Zip Code	<u> / / </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$